



**State of Georgia
Division of Family and Children Services
Office of Prevention and Family Support**

**Statement of Need (SoN)
First Time Funding - Application**

GREAT START GEORGIA

SoN Release Date:	July 30, 2015
SoN Conference Call:	August 14, 2015
Deadline for Proposal Submission:	September 11, 2015; 5:00 p.m.
Return by Mail or Overnight Delivery:	Georgia Division of Family and Children Services 2 Peachtree Street NW, 8 th Floor Suite 8-292 Atlanta, Georgia 30303
Contact:	Lindsey Dale Office of Prevention and Family Support Program Specialist Phone: (404) 232-1609 E-mail: Lindsey.Dale@dhs.ga.gov

Table of Contents

1. OVERVIEW	3
1a. Introduction	3
1b. Office of Prevention and Family Support.....	3
1c. Child Abuse and Neglect Prevention Programs, Services and Supports	3
1d. Great Start Georgia	4
2. STATEMENT OF NEED (SoN) CRITERIA	7
2a. Eligible Applicants	7
2b. Contract Award Amounts	7
2c. Contract Award Period	7
2d. Continuation Funding	7
2e. Strategic Results Framework	8
3. PROPOSAL SUBMISSION INSTRUCTIONS	9
3a. Number of Copies	9
3b. Submission Date	9
3c. Disqualification Factors.....	10
3d. Application Formatting Instructions.....	10
3e. Application Order.....	10
4. PROPOSAL NARRATIVE	11
4a. Proposal Summary	11
4b. Administration	11
4c. Target Population	11
4d. Methods and Procedures	12
4e. Continuation Plan/Sustainability	14
4f. Assurances from Community Partners	14
5. APPLICATION BUDGET WORKBOOK.....	15
5a. Fiscal Agent Responsibilities	15
5b. Application Budget Workbook Instructions	15
6. APPLICATION ATTACHMENTS	18
7. SELECTION AND CONTRACT AWARD PROCESS.....	19
8. TECHNICAL ASSISTANCE AND ATTACHMENTS	20

Georgia Division of Family and Children Services - Office of Prevention and Family Support Great Start Georgia

1. OVERVIEW

1a. Introduction

The Georgia Division of Family and Children Services' (DFCS) mission is to strengthen Georgia by providing individuals and families access to services that promote self-sufficiency, independence, and protect Georgia's vulnerable children.

1b. Office of Prevention and Family Support

The Office of Prevention and Family Support (OPFS) of the Georgia Division of Family and Children Services (DFCS), works in partnership with community-based organizations committed to reducing the incidence of child abuse and neglect by targeting at-risk families with implementing evidence-based prevention and early intervention techniques to ensure positive outcomes for children and families.

State and federal funding provides families throughout Georgia, services such as parent support programs, parent training, screening and identification tools, training opportunities, high-quality home visitation and primary and secondary child maltreatment prevention that helps local communities promote the overall health and well-being of Georgia's children, youth and families. OPFS is committed to supporting quality child abuse and neglect prevention and family resource programs throughout the state.

OPFS staff is available to assist you if you have questions in completing this application for contract funding. Please see the **technical assistance contact list on page 20** of this Statement of Need. In addition, please contact Lindsey Dale at Lindsey.Dale@dhs.ga.gov to register for the Statement of Need Conference Call scheduled for August 14, 2015 at 10:00 am.

1c. Child Abuse and Neglect Prevention Programs, Services and Supports

Child Abuse and Neglect Prevention Overall Goals for this Statement of Need:

- Strengthening parenting competencies and promoting strong parent/caregiver child attachment and interaction.
- Increasing knowledge of parenting and child development that help parents and caregivers develop a realistic understanding of their child's capabilities and behaviors, and implement strategies for effective parenting that builds strong healthy relationships.

- Providing access to resources that connect parents and caregivers with services and information to meet their specific needs.
- Strengthening families by increasing protective factors in children and parents and reducing risk factors.

Child Abuse and Neglect Prevention Programs, Services and Supports

This SoN is specifically designed for programs to implement the Great Start Georgia Framework, which includes providing home visiting services to expectant parents and families with children from birth to age 5 and providing screening and family support services through First Steps Georgia.

1d. Great Start Georgia

Great Start Georgia (GSG) provides the foundation for developing a statewide comprehensive, high quality, community-based maternal, infant, and early childhood system for all expectant parents, children birth to five, and their families in Georgia. To reach this goal, maternal and early childhood systems must be developed community by community over time. We believe the GSG approach to supporting families around the time of a child's birth and in the early years of life provides the best opportunity for improving the well-being of children and families in our state.

The GSG vision is based on several key concepts or principles:

- Families are important. All children deserve a “great start” in life, so that they can fulfill their life's potential.
- All families can benefit from support at times in their lives. The time surrounding the birth of a child and the early years of the child's life are a very sensitive period for supporting families. Some families need only basic information and a community resource directory; other families need much more.
- Communities can create a culture of caring, encouragement, and support for all families before and after the birth of a child by developing the GSG framework, which provides a coordinated system for identifying and checking-in with families of young children.
- The early brain development research and the long-term impact of early childhood experiences, either positive or negative, provide the basis for much of the GSG system.
- Child and family service providers work together and in partnership with families to determine strengths, resources, and needs. Families then choose the services and programs they want and participation is voluntary.
- Families with intensive needs can often benefit from evidence-based home visiting (EBHV). A large body of research has demonstrated the strength of these programs in improving outcomes for children and families.

The following functions of Great Start Georgia support the principles listed above:

- **Identification** – The process of finding, locating, and contacting all expectant parents, and families with children birth to age five.
- **Referral** – The process of making sure identifying information on each family is provided to a GSG screener.

- **Screening** – The process of interviewing the family to identify strengths and needs and to jointly decide next steps in terms of meeting the family’s needs. (Ex. Linkage to community resources such as medical providers or evidence-based home visiting programs)
- **Parent Education** – The process of providing the family with basic educational/ resource materials and information for expectant parents and parents with infants and young children.
- **Linkage** – The process of connecting families with the services and supports that are needed and desired by the family. Community services are offered to address family needs. **One major service strategy, especially for families with more intensive needs, is evidence-based home visiting (EBHV).** Families are also offered linkages to other services in their communities around the areas of maternal and childhood health, child safety, school readiness, community and family safety, and family economic self-sufficiency.
- **Evidence-Based Home Visiting as a major service strategy**
- **Use of GSG data system(s).**
- **For more information, please visit the Great Start Georgia website:**
<https://www.greatstartgeorgia.org/>.

Additional information regarding Great Start Georgia:

1. This SoN is for implementation for expectant parents and families with children from birth to age 5.
2. Applicant will implement an evidence-based home visiting model as their major service strategy and will choose to implement Healthy Families or Parents as Teachers.
3. Applicant will also implement the First Steps Georgia component, a universal support for all expectant parents and for all families with children ages birth to five. First Steps provides screening, parent education materials, a community resource guide, and linkage to community services. See **Annex A** for an overview of First Steps Georgia.

Applications will only be considered for the effective Evidence-Based Home Visiting program models listed below:

- **Healthy Families America (See Annex B)**
Healthy Families America (HFA) proven outcomes include reducing child maltreatment, improving maternal and child health, improving parent-child interactions, promoting children’s school readiness, decreasing domestic violence, increasing family economic self-sufficiency and linking families to resources. Home visits begin prenatally or within the first three months after a child’s birth and continue until children are between 3 and 5 years old. Visits are offered at least weekly until children are 6 months old, with the possibility for less frequent visits thereafter. The focus of HFA services is on expectant and new parents to build strong communities, thriving families and children that are healthy, safe and nurtured. Many HFA sites offer planned group activities that provide opportunities for positive parent-child interaction, peer support and parent leadership.
 - For additional information:
 - <http://homvee.acf.hhs.gov/Model/1/Healthy-Families-America--HFA-sup--sup-/10/1>

- <http://www.healthyfamiliesamerica.org/home/index.shtml>
- http://www.healthyfamiliesamerica.org/about_us/index.shtml
- www.healthyfamiliesamerica.org/downloads/hfa_logic_model.xlsx

- **Parents as Teachers (See Annex C)**

The goal of the Parents as Teachers (PAT) program is to provide parents with child development knowledge and parenting support and to provide early detection of developmental delays and health issues, prevent child abuse and neglect, and increase children's school readiness. The PAT model includes one-on-one home visits, monthly group meetings, developmental screenings, and a resource network for families. Parent educators conduct the home visits using structured visit plans and guided planning tools. Local sites offer at least 24 hour-long home visits annually to higher-need families. PAT serves families for at least two years between pregnancy and kindergarten entry.

— For additional information:

- <http://homvee.acf.hhs.gov/Model/1/Parents-as-Teachers--PAT--sup--sup-/16/1>
- <http://www.parentsasteachers.org/>
- http://www.parentsasteachers.org/images/stories/documents/LogicModel_Web.pdf

Programs must address child abuse and neglect prevention. Priority will be given to programs providing Primary Prevention services (no abuse has occurred) and Secondary Prevention services (risk factors make abuse a concern, but abuse has not already occurred and families are unknown to child protective services). Programs may not serve families with open Child Protective Services cases.

- It is **required** that applicants contact Lynda Brown, Community Outreach Coordinator for Great Start Georgia and state coordinator for First Steps:

Lynda F. Brown
Community Outreach Coordinator
Great Start Georgia
Center for Family Research, University of Georgia
478.719.8000
lfbrown@uga.edu

- It is also **required** that all applicants contact the state coordinator for the evidence-based home visiting model that they propose to implement:

Healthy Families
Paige Ferrell
Healthy Families Georgia State Coordinator
Great Start Georgia
Center for Family Research, University of Georgia
(706) 201-4919
paigef@uga.edu

Parents as Teachers
Sara Jane Blackman
Georgia Parents as Teachers State Coordinator
Great Start Georgia
Center for Family Research, University of Georgia
706-202-3273
sjblackman@bellsouth.net

2. Statement of Need (SoN) Criteria

2a. Eligible Applicants

An eligible applicant must meet **all** of the following criteria:

- Be a public government entity or 501(c)(3) non-profit organization;
- Serve as the fiscal agent for the contract and the point of contact to OPFS; and
- Be responsible, liable, and oversee financial, program and post-award reporting requirements.

NOTE: Counties currently implementing the Maternal, Infant, and Early Childhood Home Visiting Grant Program (MIECHV) are not eligible to apply.

2b. Contract Award Amounts

Each applicant is eligible to apply for a maximum of \$150,000 for the initial 9-month award period with a *possibility* of additional continuation funding. The application for the first funding period must include a budget proposal comprised of a 3-month planning period and a 6-month operating budget for administration and direct service activities.

2c. Contract Award Period

The first-time funding contract award period covers a 9 month period, January 1, 2016 to September 30, 2016 which includes a 3 month planning period (January 1, 2016 through March 31, 2016). All service delivery activities must begin within 90 days of the start date of the contract award.

2d. Continuation Funding

A continuation proposal is required annually and is funded for one-year periods with a possibility of renewal each year for 2 years, unless otherwise noted in subsequent continuation SoN. Agencies are expected to seek other sources of funding to support their programs on a long-term basis.

The granting of funds in one year is not a commitment to continue assistance in the future and does not guarantee future funding. The annual submission allows a program to improve or modify objectives or activities as well as assess the completion of outcome measures.

It is the intent that programs become self-sustaining after contract funding ends in 2 years 9 months.

Continuation contracts are conditional on contractor's ability to meet all of the following expectations:

1. Exhibit professional management of funds and exhibit compliance with OPFS administrative and contractual requirements;
2. Meet prior year contract performance requirements; and
3. Demonstrate the ability to sustain the program at the conclusion of OPFS funding

2e. Strategic Results Framework

OPFS Outcome Measures for Great Start Georgia

Applicants must adhere to the following outcome measures, with a target population of expectant parents and families with children from birth to age 5. Annual implementation and evaluation reports will be required throughout the contract implementation period.

Outcome Indicator	Performance Levels
Diagnostic Developmental Screen utilizing Ages and Stages Questionnaire (ASQ) and ASQ-SE	After having been appropriately screened with the ASQ following the prescribed intervals, at least 75% of target children whose scores are below the cutoff in any domain will be referred for further evaluation to an appropriate service provider. After having been appropriately screened with the ASQ-SE following the prescribed intervals, at least 75% of target children whose scores are above the cutoff in any domain will be referred for further evaluation to an appropriate service provider.
Child Maltreatment	At least 97% of target children will remain free from child abuse and neglect (e.g., have no substantiated cases of child abuse or neglect).
Local Collaboration	At minimum, at least two (2) new cumulative Memorandums of Understanding (MOUs) will be developed with partner organizations.
Participant Numbers	A percentage of families required to be served in Home Visiting and First Steps.

Failure to meet performance requirements may result in a reduction in performance payment for each performance measure not met by the contractor

- In addition to the Outcome Measures listed above, applicants will also be required to track data for the following benchmarks:
 - Improved Maternal and Child Health
 - Improvement in School Readiness
 - Reduction in Domestic Violence
 - Improvement in Family Economic Self-Sufficiency

- Coordination of Referrals for other Resources and Supports

NOTE: Implementing programs will use the Great Start Georgia data system and will follow reports in that system.

3. PROPOSAL SUBMISSION INSTRUCTIONS

3a. Number of Copies

Submit **Original Application and three (3) Copies**: Application Face Sheet signed in blue ink, Program Proposal Narrative, Budget Summary Workbook and application attachments with all signature pages signed in blue ink, three (3) additional copies, and one (1) electronic copy.

Electronic Submission: The electronic copy shall be submitted on compact disc (CD) or thumb drive which will serve as the electronic submission. The electronic copy includes the Program Proposal Narrative in Microsoft Word format; the Budget Summary Workbook in Microsoft Excel format; and the Application Face Sheet and all attachments in PDF format. OPFS will not accept email copies.

Bind the original application and copies with binder clips. The narrative portion of the application **must** follow the format in Section 4 – Proposal Narrative beginning on page 11. The application **must** be submitted in the order of the checklist provided on page 10.

3b. Submission Date

Applications must be postmarked By U.S. Postal Service or common carrier **on or before September 11, 2015** and must include the original signature of the executive officer of the fiscal agent/applicant on the application face sheet. Applications postmarked after that date will be classified as late and will not be considered for funding. Applicants are cautioned to request a legibly dated United States Postal Service postmark or receipt, or to obtain a legibly dated receipt from a commercial carrier.

OPFS will not accept hand delivered, office-metered postmarks, faxed, or e-mailed applications.

Georgia Division of Family and Children Services
2 Peachtree Street, NW, 8th Floor
Suite 8-292
Atlanta, Georgia 30303

Applicants will not receive verification from OPFS regarding receipt of the application package. We ask that you do not call the office to verify receipt. Applicants wishing to verify receipt are encouraged to use a return receipt service provided by the post office or other such carriers.

3c. Disqualification Factors

Any application received after the September 11, 2015 deadline will be regarded as late and will not be considered for funding. It is the responsibility of the applicant to ensure the proposal is received by the specific deadline. Applicants must comply with all forms, assurances, and certifications attached to this SoN.

- Applicant is not a public government entity or 501(c)(3) non-profit organization in Georgia
- Submission fails to be postmarked by U.S Postal Service or commercial carrier by deadline date; **September 11, 2015; 5:00 pm**
- Submission fails to include the original signature of the executive officer of the fiscal agent (applicant) on the application face sheet;
- Submission fails to include the application program narrative, application budget and application attachments; and
- Failure to provide appropriate number of copies and format requested.
- Application lacks original signatures, where requested.

3d. Application Formatting Instructions

- Number every page submitted as part of your application
- Use type that is 12-point font size and one inch margins
- The application narrative should be typed on white paper that is 8 ½ x 11 inches
- Include a footer with the fiscal agent's name and page number
- Adhere to page limits
- Applications should not be stapled or bound; use binder clips or paperclips
- OPFS requires that applicants restate and number each proposal narrative question, followed by the response

3e. Application Order

Use the table below to ensure that all requested information is included in your application in the correct order.

Required Application Order	Maximum Page Limit (where applicable)	Applicant Checklist (Y/N)
1. Application Face Sheet (Form A) signed in blue ink		
2. Proposal Narrative		
A. Proposal Summary	1/2	
B. Administration	1/2	
C. Target Population	1	

Required Application Order	Maximum Page Limit (where applicable)	Applicant Checklist (Y/N)
D. Methods and Procedures	7	
E. Continuation Plan/Sustainability	1	
F. Assurances from Community Partners	1	
3. Application Budget Workbook (Form B)		
4. Forms, Assurances, Certifications (Form C) signed in blue ink		
5. Legal Agreement with Fiscal Agent (if different from applicant) (A-1)		
6. Fiscal Agent Financial Statements (A-2)		

4. PROPOSAL NARRATIVE

The following information provides a description of necessary components to be contained in the narrative portion of your proposal. Limit the narrative to twelve (11) pages and use the outline format described in this section. The narrative is a detailed statement of the work to be undertaken and answers who, what, when, where, why, and how statements of the contract application. OPFS requires that applicants restate and number each question followed by the response.

4a. Proposal Summary (1/2 page)

Please provide a clear and concise summary of the major points from the body of the application, including:

1. Name of evidence-based home visiting model being implemented in FY 2016.
2. Total number of families projected to be served by home visiting in FY 2016.
3. Total number of families projected to receive First Steps Georgia services in FY 2016.

4b. Administration (1/2 page)

1. Name the implementing agency. Provide a brief description of the implementing agency. Name the applicant and fiscal agents, if these agencies are different from the implementing agency.
2. List the agency's qualifications and experience with managing contracts.
3. Does the fiscal agent have the ability to maintain a quarterly cash flow?

4c. Target Population (1/2 page)

The target population is the group of participants that the services in a program are intended and designed for. Applicants must serve families with children from birth to age 5.

Provide a detailed description of the clearly defined target population to be served in the contract period, including the following:

1. Target geographic location (e.g. county, neighborhood). *Include specific information about how the target population was selected.*
2. Target group/age range
3. How many individuals will be served during the contract award period?
Please break down by the following categories: children, mothers, fathers, total families and other caregivers.

4d. Methods and Procedures/Community Proposal (7 pages)

1. First Steps Georgia
 - a. Identification and Referral
 - i. Describe your plan for establishing and maintaining service delivery location(s) and processes.
 1. Identify community partners with whom you plan to establish an agreement to refer families to your GSG services.
 2. Identify locations that can provide the three points of entry into your GSG services:
(1) Expectant Mother (2) Newborn (3) Child
 3. Describe plans for expanding community outreach in FY 2016.
 - a. Indicate the names of community agencies that your GSG fiscal agent plans to approach to develop a minimum of two Memoranda of Understanding (MOU) in FY 2016 to support provision of GSG services.
 - b. Indicate the names of community agencies that you plan to approach to develop a clear Point of Contact (POC) in FY 2016 to support provision
 - ii. Describe methods that your agency and community partners may use to ensure that each is knowledgeable about the services that the other provides and the benefit of those services to families.
 - b. Screening:
 - i. Describe your plan for completing the GSG Central Intake Screen on each family to be served by GSG utilizing the GSG Central Intake Core Screen.
 1. Identify locations where you expect screening of families to occur.
 2. Identify positions within your agency that will that screen families.
 3. Identify community partner agencies that will complete GSG intake screens, if applicable.
 - ii. Identify entity(ies) that will enter screen data into the GSG data systems (CIDS and GEOHVIS).

- c. Parent Education:
 - i. Describe your plan for obtaining relevant and age-appropriate educational materials from reliable sources on the following topics: Maternal Health, Newborn/Child Health, Home and Child Safety, Community and Family Safety, School Readiness, and Family Economic Self-sufficiency.
 - ii. Specify the entity(ies) that will be responsible for assembling the parent packets of materials.
 - iii. Describe the process(es) of providing parent packets to families.
- d. Linkage:
 - i. Identify entity(ies) that will be responsible for developing and maintaining a resource guide that includes resources in your community that are appropriate to all expectant parents and families with children birth to five years of age.
 - ii. Describe your plan for developing the community resource guide and updating it at least annually.
 - iii. Describe your plan for linking families to Great Start Georgia services in your community.
 - iv. Describe the plan for ensuring ongoing communication between your screener(s) and home visiting program(s) to share information regarding home visiting program vacancies, home visiting program special limitations on accepting families, updates on community resources for families in the GSG target population, and other information important to linkage to services.

2. Evidence-Based Home Visiting (EBHV) Programs

- a. Specify the criteria for entry of families into the EBHV model being used in the community.
- b. Describe the plan for coordination of home visiting program communication, staff development, and other activities if the community has more than one EBHV program.
- c. Describe the approach/processes/procedures that will be used to support implementation with fidelity to the chosen EBHV model.
- d. Describe/list components of the home visiting model and resources in the community that support EBHV participant achievement of the following benchmarks: Improved Maternal and Child Health; Reduction in Child Injuries and Maltreatment; Improvement in School Readiness; Reduction in Domestic Violence; Improvement in Family Economic Self-Sufficiency; Coordination of Referrals for Other Resources and Supports

Examples for the Improved Maternal and Child Health benchmark:

- *If applicable, state that the EBHV program model being used has demonstrated evidence of effectiveness in improving this benchmark.*
- *Specify components of the program model curriculum or activities that impact this benchmark.*
- *Specify community referral resources that can support families in meeting this benchmark.*

3. Coordinated Care

- a. Describe the plan for coordination of services between the home visiting program(s) and other service providers in the community in FY 2016, including any opportunities for regular sharing of information between agencies and method(s) to be used to confirm follow through of referrals.

4. Staffing

- a. Describe the primary roles and responsibilities for each contract-funded position. *Also include a job description for each position discussed (Attachment A-3).*
- b. Explain the plan for orientation and training of contract-funded staff.

4e. Continuation Plan/Sustainability (1 page)

Describe the program's sustainability plan that will provide for services and supports to continue and even expand without funding from OPFS. *Provide information about sustainability resources that are in hand, firmly committed, or to be raised.*

1. List the current funding sources and funding amounts for the organization.
2. Provide a description of the applicant's ability to maintain adequate cash flow for the program (for a minimum of 45 days) during the entire funding period.
3. Describe fundraising plans (efforts) and estimated financial results planned through the end of the contract period.
4. List contract applications the program will submit through the end of the contract period. Please include the date, funding source, amount and how the funds would be spent toward the program.

4f. Assurances from Community Partners (1 page)

The community representative/partner that is submitting the proposal on behalf of the community must provide an assurance that certain community partners have knowledge of proposal and agree with its overall direction and content. The specific partners include:

1. Family Connection Partnership
2. Public Health Department

3. Department of Family and Children Services
4. Existing Home Visiting Programs (EHS-HBO, HFG, NFP, PAT)
5. Other Community Service Agencies/Providers or Leaders
(Definition: Any community partner integral to the success of the effort. These partners are defined locally and may differ from county to county.)

The proposal should include a statement that reads: “I assure that the following community partners and home visiting program managers have knowledge of this community proposal for implementation of evidenced-based home visiting programs in the county and agree with the overall direction and content of the proposal.” Partners include representatives from:

- Family Connection Partnership/Board
- District or Local Public Health Office
- County Department of Family and Children Services
- Existing Home Visiting Programs (HFG, PAT, EHS-HBO)
- Other Community Service Agencies/Providers or Leaders

5. APPLICATION BUDGET WORKBOOK

5a. Fiscal Agent Responsibilities

All applicant agencies receiving OPFS funds should have an annual agency budget that derives at least 25% of its income from other federal, state, local or private funds, exclusive of OPFS awards.

The applicant agency must be able to provide an adequate accounting system that should meet the following criteria as outlined below:

1. Accounting records provide information needed to identify each contract awarded (State, Federal, Local Government, and Private) to applicant by identifying the receipt of funds for each contract and the expenditure of funds for each contract award.
2. Entries in accounting records refer to subsidiary records and/or documentation which support the entry and can be readily located.
3. The accounting system provides accurate and current financial reporting information.
4. The accounting system integrates with an adequate system of internal controls to safeguard the funds and assets covered, check the accuracy and reliability of accounting data, promote operational efficiency, and encourage adherence to prescribed management policies.

Office of Prevention and Family Support reserves the right to fund requests completely or partially depending upon total funds available and application review.

5b. Application Budget Workbook Instructions

Complete the Budget Workbook (Form B) in Excel format. The Excel workbook contains a budget summary for the applicant. The budget summary must provide computation of requested funds and justification of costs in relation to activities. A detailed budget narrative should also be submitted for clarity of expenses requested in the different budget categories. Applicants must provide details on each cost item in the proposed budget.

Budgets should also be submitted electronically by CD or flash drive.

1. Total Grant Budget **not exceeding \$150,000**
2. 9-Month Operating Budget **not exceeding \$150,000** which is the total of
 - 3-month Planning Budget;
 - 6-Month Direct Service Budget; and
 - 6-Month Indirect Costs Budget **not exceeding 10%** of 6-month operating budget.
3. Complete a separate budget narrative and justification for each of the three sub-budgets.
4. The two last worksheets in the workbook provide detailed information regarding allowed and non-allowed cost and activities.

[Worksheet 1: Total Grant Budget:](#) This is the total budget for 9 months for the period of 01/01/16 – 9/30/16; including the 3-month planning period; 6-month annual operating budget; and 6-month administrative budget. The Total Grant Budget worksheet is auto-populated from other worksheets in the workbook. Type in at the top of the worksheet, the name of the applicant agency.

[Worksheet 2: 3-Month Planning Period Budget:](#) This is the three month planning budget for the period 1/1/16 – 3/31/16. For the three month planning period, complete a separate sub-budget and budget narrative. The below costs are not limited nor required to be included in the sub-budget, however, all costs must be justified in the budget narrative.

- Hiring program staff and advertising for positions
- Purchase of computer equipment and software for direct service staff
- Program development and planning group meetings

[Worksheet 3: 6-Month Direct Service Budget:](#) This is the 6-month direct service activity budget for the period 4/01/16 - 9/30/16. Complete a separate sub-budget and budget narrative for annual operating costs for direct services. The below costs are not limited nor required to be included in the sub-budget, however, all costs must be justified in the budget narrative.

- Pro-rated staff of the direct service activity
- Direct service personnel, salary/hourly personnel, temporary employees, consultants
- Program supplies and materials, direct service meeting expenses, curriculum, training for certification, technical assistance, travel for direct service, etc

- Most IT costs, real estate rental, and most telecommunication cost should be requested under the administrative budget that support the program.

Worksheet 4: 6-Month Administrative Budget: This is the 6-month budget for administrative and infrastructure cost that may not to exceed 10% of total OPFS contract funds requested. The sub-budget may include cost as listed below for agency administrative cost and infrastructure support. The below costs are not limited nor required to be included in the sub-budget; however, all costs must be justified in the budget narrative.

- Pro-rated share for administrative assistance, executive administrative oversight, accounting
- Day-to-day administrative costs related to direct service activity.
- General operating supplies and materials.
- Pro-rated share of office rental, utilities, telecommunications, and equipment
- Purchase of computer equipment, printers, program software for direct service staff, if not purchased during the three month planning period

Worksheets 5, 6, 7: Budget Narratives: Complete a separate budget narrative including justification for cost for the 6-Month Direct Service Budget; and 6-Month Indirect Budget. For each budget narrative worksheet, complete a budget narrative and provide budget justification for each budget category within the sub-budget. The budget narrative should include computation of requested funds and justification of costs for each budget category within the sub-budget.

Worksheets 8, 9: Allowed and Unallowed Costs and Activities: A list of allowable and unallowable costs is provided at the back of the Budget Summary workbook and can also be used to define the budget categories.

Common Indirect (Administrative) Costs:

- Contracts Manager
- Finance Director/Accountant/Bookkeeper
- Trainer
- Bookkeeping costs
- Financial and/or programmatic audit costs
- Rent and/or mortgage on administrative offices
- Utilities on administrative offices
- Office supplies for staff
- Pens, paper, etc.
- Insurance
- Employee travel to grantee trainings
- Printing
- Meeting Expenses
- Copier
- Postage
- Vehicle Maintenance
- Background Investigations

Costs that will need justification to be considered direct service:

- Trainings
- Conferences
- Travel
 - Outside of direct service travel
- Equipment
- Meeting expenses
- Administrative Staff and Supervisors who also provides direct service
 - Supervision of any staff is not direct service, only hands-on work with community
- Volunteers
- Cell phones for direct service employees requiring travel

6. APPLICATION ATTACHMENTS

The applicant is required to comply with the following as described in the SoN attachments.

Form A: **Application Face Sheet**: Signed by executive officer of the applicant agency and fiscal agent, if different from applicant.

Form B: **Application Budget Workbook**: Submitted in Microsoft Excel format. Submit 1) Budget Summary, and 2) Budget Narrative and Justification.

Form C: **Forms, Assurances, and Certifications**: To certify intent to comply with all of the following, the chief executive officer of the fiscal agent must review, complete, sign in blue ink, and submit all of the following forms applicable to the fiscal agent:

1. Background Check Form
2. Tax Compliance Form (non-profits only)
3. Security Immigration and Compliance Contractor Affidavit (non-profits only)
4. Certificate of Liability Insurance- Para 129 Form (non-profits only)
5. Corporate Resolution (non-profits only)
6. Vendor Management Form
7. W-9 Form

A-1: **Legal Agreement with Fiscal Agent (if different from applicant)**: Legally binding MOU between applicant agency and its fiscal agency specifying the relationship between the parties and work flow and responsibilities between the parties.

A-2: **Fiscal Agent's Financial Statements**: Fiscal agent must maintain compliance and eligibility to receive state funds by complying with audit of OMB Circular A-133 "Audits of States, Local Governments, and Non-Profit Institution" and requirements of O.C.G.A. 36-18-7.

Reference: <https://www.audits.state.ga.us/nalgad/rlogovt.html>

Reference: https://www.audits.state.ga.us/nalgad/Audit_law_OCGA_36-81-7_effective_2004.pdf

Applicants shall submit the following:

Local Unit of Government Applicant:

Local units of government must attach to the application an audit from the most recently concluded fiscal year in accordance with OMB Circular A-133.

Non-Profit Applicant:

Must attach to the contract application its financial statements from most recently concluded fiscal year:

- Audit from most recently concluded fiscal year in accordance with OMB Circular A-133 “Audits of States, Local Governments, and Non-Profit Institution and requirements of O.C.G.A. 36-81-7.
- Or, if the non-profit applicant is not required to have an audit, attach to the application the following: 1) balance sheet from the most recently concluded fiscal year showing assets and liabilities, and 2) statement of financial activity from the most recently concluded fiscal year showing revenue and expenditures.

7. SELECTION AND CONTRACT AWARD PROCESS

OPFS will review all applications received by the declared deadline to ensure all necessary worksheets and documentation are completed and included in submitted applications. The application review committee will not review incomplete applications, and OPFS will not permit applicants to add information to their application after submission unless clarification or additional information is requested by OPFS.

Award notifications will be sent via U.S. mail. Communication via telephone, email, and/or fax regarding award notices is prohibited before official notification by OPFS.

7a. Contract Award Agreement

OPFS will offer a performance-based contract agreement to selected applicants that will define performance standards, process and quantitative outcomes, and an approved budget. Contract payments will be based on the achievement of specific accomplishments of process and quantitative outcomes rather than incurred costs of the contractor.

OPFS reserves the right to make changes to the application budget at the time of the contract award and will communicate any changes to the fiscal agent. OPFS may negotiate all or part of any proposed budget after award of the contract award agreement in the event that funding or program requirements so dictate.

7b. Contract Award Management Training

If an applicant is awarded a contract, it is mandatory to participate in OPFS contract award management training as requested. The initial training may include Contract Reporting Training and GSG Data Management System(s) training. The trainings will take place in a central location, at the contractor's site and/or online via webinar. The timing of the trainings will be determined at a later date.

OPFS will also offer a number of post-award training opportunities and technical assistance activities. Individual technical assistance and other supportive training activities will also be conducted for contractors.

7c. Evaluation and Reporting Requirements

OPFS requires that contractors comply with and fully participate in the following components of reporting, performance and evaluation:

Reporting in Data Management System(s): The contractor will ensure that service and participant data are reported through the prescribed online data management and reporting system(s). The contractor will be responsible and liable for reviewing all data entered into the online data management system(s) for completeness, accuracy, and compliance with OPFS reporting requirements.

NOTE: Implementing programs will use the Great Start Georgia data systems and will follow reports in those systems.

8. TECHNICAL ASSISTANCE

OPFS asks that applicants direct all questions to the program contact below. Questions will be permitted until the date of the proposal submission deadline. Applicants are strongly encouraged to pose all questions as early as possible in the SoN process.

PROGRAM QUESTIONS:

Lindsey Dale
Program Specialist
Office of Prevention and Family Support
Lindsey.Dale@dhs.ga.gov
(404) 232-1609

FINANCIAL/ADMINISTRATIVE QUESTIONS:

Kirby McClendon
Finance Officer
Office of Prevention and Family Support
Kirby.Mcclendon@dhs.ga.gov
(404) 232-1614

Attachment A-1

Georgia Division of Family and Children Services - Office of Prevention and Family Support

Legal Agreement with Fiscal Agent (if different from applicant)

Attachment A-2

Georgia Division of Family and Children Services - Office of Prevention and Family Support

Fiscal Agent's Financial Statements
